TREATMENT PROTOCOL: SYNCOPE *

- 1. Basic airway
- 2. Spinal immobilization prn
- Pulse oximetry 3.
- 4. Oxygen prn
- 5. Advanced airway prn
- If shock, treat by Ref. No. 1246, Non-Traumatic Hypotension Treatment Protocol 6.
- Cardiac monitor: document rhythm attach ECG strip if dysrhythmia identified 7. 12-lead ECG if suspected cardiac origin
- 8. Venous access prn
- Perform blood glucose test; if blood glucose is less than 60mg/dl: 9.

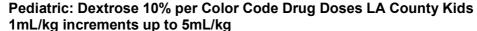
Consider oral glucose preparation if patient is awake and alert

Dextrose 10% 250mL IV

Infuse 125mL, and reassess

If positive response, stop infusion

If minimal or no response, infuse the remaining 125mL for a total of 250mL



If unable to obtain venous access:

Glucagon 1mg IM

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Pediatric: Glucagon per Color Code Drug Doses LA County Kids

0.5mg (0.5mL) IM < 1 year

1mg (1mL) IM 1 year or older

10. If cardiac dysrhythmia, treat by Ref. No. 1212, Symptomatic Bradycardia or Ref. No. 1214, Tachycardia with Pulses

CONTINUE SFTP or BASE CONTACT

12. If blood glucose remains less than 60mg/dl:

Dextrose 10% 250mL IV

Infuse 125mL, and reassess

If positive response, stop infusion

If minimal or no response, infuse the remaining 125mL for a total of 250mL



Pediatric: Dextrose 10% per Color Code Drug Doses LA County Kids 1mL/kg increments up to 5mL/kg

If unable to obtain venous access:

Glucagon 1mg IM

Pediatric: Glucagon per Color Code Drug Doses LA County Kids 0.5mg (0.5mL) IM < 1year

1mg (1mL) IM 1 year or older

EFFECTIVE DATE: 7-1-11 REVISED: 04-01-17 SUPERSEDES: 03-05-15